

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N01250 1. Entity Name OCEAN LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 2127-43 N. OCEANSHORE BLVD FLAGLER BEACH, FL 32136 US	Mailing Address PO BOX 1373 FLAGLER BEACH, FL 32136 US
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DO NOT WRITE IN THIS SPACE



02012007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 59-3078550	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MACKOUL, GEORGE R
2139 N OCEANSHORE BLVD
FLAGLER BEACH, FL 32136**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☒ \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MARSH, RICHARD 2129 N OCEANSHORE BLVD JACKSONVILLE, FL 32136
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS LINDSEY, BARBARA 2133 N. OCEANSHORE BLVD. FLAGLER BEACH, FL 32136
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MACKOUL, GEORGE 2139 N OCEANSHORE BLVD FLAGLER BEACH, FL 32136
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04/24/07-80005-003 75.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4/17/07 904/396-5208**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone